



Join in. Stand out.

GRADUATE APPLICATION FOR ADMISSION

\$30.00 Graduate Application Fee non-refundable

ONLINE application available at www.deltastate.edu. Click on APPLY NOW.

PLEASE PRINT OR TYPE, AND FILL IN ALL BLANKS.

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Full Name \_\_\_\_\_ (Last) (First) (Middle)

E-mail Address \_\_\_\_\_

Permanent Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

County \_\_\_\_\_ Nation (If Not U.S.) \_\_\_\_\_

Home Phone (\_\_\_\_\_) - \_\_\_\_\_ Are you a legal resident of Mississippi? \_\_\_\_\_

In order to accurately respond to requests from a variety of federal, state, and community entities, DSU asks you to answer the following questions:

Gender: [ ] Female [ ] Male Marital Status: [ ] Single [ ] Married [ ] Separated

Religious Affiliation: \_\_\_\_\_ [ ] Divorced [ ] Widowed

1. Do you consider yourself to be Hispanic/Latino? \_\_\_ Yes \_\_\_ No

2. In addition, select one or more of the following racial categories to describe yourself:

- \_\_\_ White \_\_\_ Asian
\_\_\_ Black or African American \_\_\_ American Indian or Alaska Native
\_\_\_ Native Hawaiian or Pacific Islander

3. Select the answer that best describes either parent's highest level of education completed.

- \_\_\_ Less than High School diploma \_\_\_ Bachelor Degree
\_\_\_ GED/High School diploma \_\_\_ Master or Specialist Degree
\_\_\_ Some college coursework/no degree \_\_\_ Doctoral or Professional Degree
\_\_\_ Associate Degree

List all prior colleges or universities attended, listing most recent first, INCLUDE ANY ATTENDANCE AT DELTA STATE UNIVERSITY.

Table with 4 columns: INSTITUTION, STATE, DEGREE, DATES OF ATTENDANCE. Contains 4 rows of blank lines for data entry.

ENTRY TERM: ( ) Fall 20\_\_\_ ( ) Spring 20\_\_\_ ( ) Summer I 20\_\_\_ ( ) Summer II 20\_\_\_

I hereby make application for admission to Delta State University and I agree to abide by the regulations of the University and to accept responsibility for payment of all charges incurred while I am a student. I further declare that the information on this application is complete and accurate.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

(OVER)

**CHECK (✓) SPACE BESIDE YOUR PROPOSED MAJOR:**

**MASTER OF APPLIED SCIENCE (MAS)**

Geospatial Information Technology

**MASTER OF ARTS IN LIBERAL STUDIES (MALS)**

Liberal Studies

**MASTER OF ARTS IN TEACHING (MAT)**

Teaching (Alternate Route)  
 Elementary Education  
 Secondary Education

**MASTER OF BUSINESS ADMINISTRATION (MBA)**

Business Administration  
 Integrated Master of Business Administration

**MASTER OF COMMERCIAL AVIATION (MCA)**

Commercial Aviation

**MASTER OF EDUCATION (MED)**

Counseling  
 Clinical Mental Health  
 School Counseling  
 Educational Administration & Supervision  
 Elementary Education  
 Health, Physical Education, & Recreation  
 Secondary Education  
 Art  
 English  
 History  
 Social Science  
 Special Education

**MASTER OF PROFESSIONAL ACCOUNTANCY (MPAC)**

Accountancy

**MASTER OF SCIENCE (MS)**

Community Development  
 Sport and Human Performance

**MASTER OF SCIENCE IN NATURAL SCIENCES (MSNS)**

Natural Science  
 Biological Science  
 Physical Science

**MASTER OF SCIENCE IN NURSING (MSN)**

Nursing  
 Nurse Administrator  
 Nurse Educator  
 Nurse Practitioner

**MASTER OF SCIENCE IN SOCIAL JUSTICE & CRIMINOLOGY (MSJC)**

Social Justice and Criminology

**EDUCATIONAL SPECIALIST (EDS)**

Counseling  
 Educational Administration & Supervision  
 Elementary Education

**DOCTOR OF EDUCATION (EDD)**

Professional Studies  
 Counselor Education  
 Educational Administration & Supervision  
 Elementary Education  
 Higher Education

**DOCTOR OF NURSING PRACTICE (DNP)**

Nursing

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**NON-DEGREE**  
 **FOR CERTIFICATION ONLY**  
IN \_\_\_\_\_

**ADMISSIONS DOCUMENTS**

The completed paper application, immunization records, one official transcript from each institution attended, and the application fee should be sent to the following address:

Graduate Studies Office  
Delta State University  
Suite 239 Kent Wyatt Hall, Room 245  
Cleveland, MS 38733

If required by your degree program, letters of recommendation and other supporting documents should be submitted to the Graduate Studies Office. If you have any questions, contact us at 662.846.4700 or via email at grad-info@deltastate.edu.

Delta State University is committed to a policy of equal employment and educational opportunity. Delta State University does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or veteran status. This policy extends to all programs and activities supported by the University.